1	r Fund - §54.1009 Annual Reporting Hection Form		Aug Dund	FCC Form Approved by OMB OMB 3060-1185
	Study Area Code	238019	Avg. Burd	en Estimate per Respondent: 18 Hours
<015>	Study Area Name	Carolina West Wireless, Inc.	-	
<020>	Program Year	2018	· · · · · · · · · · · · · · · · · · ·	
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.		
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com		
<040>	Has the information required pursuant to §54.1009 leads to §554.1009 leads to			•
	the documents me	u with the Form 481 reporting	<041>	
	<042> Cite the Study Area Code (SAC) for the For	m 481 reporting	<042>	
<080>	Tribal Lands Reporting (y/n?) (Does this study area cover	tribal lands? Yes or No)	0	•

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase | Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Cai	rrier Contact Form			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code		238019	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2018	-
<030>	Contact Name - Person USAC should contact regarding the	nis data	Todd Slamowitz	
<035> <039>	Contact Empil Address - Empil Address - Freil	ed in data line <030>	7035848678 ext.	
- 10332	Contact Email Address - Email Address of person identific	ed in data line <030>	tslamowitz@fcclaw.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder			
<110>	FCC Registration Number	0001940022		
<111>	Filing Carrier Name			
<112>	Winning Ridder Carrier Name	Carolina West Wirele		
<113>	Stroot Address (or DO Dow)	Carolina West Wirele		
<114>	· ·	1307 Curtis Bridge F	Road	
<115>	· ·	Wilkesboro		
	-	NC		
<116>		28697		
<117>		3369735000 ext.		
<118>	Fax Number	3368387550		
<119>	Email Address	slaytons@carolinawes	st . Com	
<120>	iformation if same as above, indicate in this box Name (First, MI, Last, Suffix)			
<121>	Filing Consider Name	layton S. Stewart		
<122>		arolina West Wireles	ss, Inc.	
<123>		307 Curtis Bridge Ro	oad	
	-	ilkesboro		
<124>	State	C		
<125>	Zip-Code 2	8697		
<126>	Telephone Number	369735000 ext.		
<127>	Fax Number 3	368387550		
<128>	Email Address s	laytons@carolinawest	Com	
	_			
<u>vutnorize</u>	d Agent Information if no agent, indicate in this box			
<130>	Name (First MI Last Cuffix)	33.63		
<131>	Company	odd Slamowitz		
<132>	Character (20.0)	kas, LaFuria, Gutie		
<133>		00 Greensboro Drive	, Suite 1200	
		sons		
<134>	State	<u> </u>		
	Zip-Code 22	102		
<136>	Tolophone Number	35848678 ext.		
<136>	Telephone Number 70	35848678 ext.		

(060) Co	verage and Performance Report		FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	238019	
<015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com	
<140>	Coverage and Performance Report Year 01/2017 - 12/2017		
	060_cww_มc Coverage and Performace attachments	zip	

<a2> <a3> <b1> <b2> <b2> <b3> <141> <c1> <c2> <c3> Total Road Road Certify that Road Miles per Miles Coverage and Resident Total Resident Census covered Performance data Resident Population Population Block per is uploaded Population per Newly Reached Reached by Census Newly Census (Yes/no) State County Census Block Census Block by Service Service Block Reached Block -- See attached worksheet Percentage of Total Percentage of Total Population Reached by Road Miles covered

by Service

Service

Page 4 of 8

_<010>	Study Area Code	238019
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of	Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)
	arrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an I certify that (Name of Agent) Lukas, LaFuria, Gutierrez & Sac carrier. I also certify that I am an officer or employee of the reportin authorized agent; and, to the best of my knowledge, the reports and	is authorized	to submit the information reported on behalf of the reporting
Name of Authorized Agent: Lukas, LaFuria, Gut	tierrez & Sachs, LLP	s accurate.
Name of Reporting Carrier: Carolina West Wirel		
Signature of Authorized Officer or Employee: CERTIFIED ONLINE		D. COMPANY
Printed name of Authorized Officer or Employee: Thad Southers		Date: 06/08/2018
Title or position of Authorized Officer or Employee: CFO		
Telephone number of Authorized Officer or Employee: 3369735500 e	ext.1010	
Study Area Code of Reporting Carrier: 238019	Filing Due Date for this form	n: 07/02/2018
Persons willfully making false statements on this form can be punished under Ti		ons Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment

	rized to File Compliance with 47 CFR §54.100	Stattal on penan or reporting Carrier
I, as agent for the reporting carrier, certify that I am authodata provided by the reporting carrier; and, to the best of	orized to submit the certification on behalf of the re my knowledge, the information reported herein is a	porting carrier; I have provided the data reported herein based caccurate.
Name of Reporting Carrier:	Carolina West Wireless, Inc.	
Name of Authorized Agent Firm:	Lukas, LaFuria, Gutierrez & Sachs, LLP	
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 06/06/2018
Name of Authorized Agent Employee:	Todd Slamowitz	Date. 06/06/2018
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Telephone number of Authorized Agent or Employee of Ag	ent: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238019	Filing Due Date for this for	rm: 07/02/2018

(080) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		238019	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding to	his data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identifie	ed in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identifi		tslamowitz@fcclaw.com	
<142>	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
	-			
<145>	Tribal Government Engagement Obligation	Name of Attached Docum	nent (.pdf)	
	If your company serves Tribal lands, please select (Yes, the each of these boxes to confirm the status described on the PDF, on line 145, demonstrates coordination with the Trigovernment pursuant to § 54.1004 includes:	the attached	r	
		(Ye	Select	

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	(100) 110)
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

(090) Project	t Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	238019
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210> <211>	Actual Completion Date Project Status Description (attached)	Project Status Description - Line 211.pdf
		{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	-
<214>	Status of Network Deployment - Deployment	
<215>	Status of Network Deployment - Maintenance	-
<216>	Project Budget Status	<u> </u>
<217>	Project Plan Status	√
<218>	Network will Support 3G/4G Mobile Service ?	3G (4G

(101) Certification - Reporting Carrier FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8
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<010>	Study Area Code	238019
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the lest of my knowledge, the information reported on this form and in any attachments is accurate.					
Name of Reporting Carrier:					
Signature of Authorized Officer:	Date				
Printed name of Authorized Officer:					
Title or position of Authorized Officer:					
Telephone number of Authorized Officer:					
Study Area Code of Reporting Carrier:	Filing Due Date for this form:				

05/16/2018 Page 7

Approved by OMB OMB Control No. 3060-1185 Page 8 of 8

<010>	Study Area Code	238019
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
_ <039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) Lukas, LaFuria, Gutierrez & Sachs, LLP also certify that I am an officer of the reporting carrier; my responsibilities include enagent; and, to the best of my knowledge, the reports and data provided to the authorization.	is authorized to submit the information reported on behalf of the reporting carrier suring the accuracy of the data reporting requirements provided to the authorized ted agent is accurate.
Name of Authorized Agent: Lukas, LaFuria, Gutierrez & Sachs, LLP	
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/08/2018
Printed name of Authorized Officer: Thad Southers	
Title or position of Authorized Officer: CFO	
Telephone number of Authorized Officer: 3369735500 ext.1010	
Study Area Code of Reporting Carrier: 238019 Filing Due	Date for this form: 07/02/2018

Certification of Agent Authoriz	ed to File for Mobility Fund Recipients on Bel	half of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authori reported herein based on data provided by the reporting car	ted to submit the reports for Mobility Fund reciplent rier; and, to the best of my knowledge, the informat	ts on behalf of the reporting carrier; I have provided the data tion reported herein is accurate.
Name of Reporting Carrier: Carolina West Wir	eless, Inc.	
Name of Authorized Agent Firm: Luk	as, LaFuria, Gutierrez & Sachs, LLP	
Signature of Authorized Agent or Employee of Agent:	ERTIFIED ONLINE	Date: 06/06/2018
Name of Authorized Agent Employee:	Lukas, LaFuria, Gutierrez & Sachs, LLP	
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Telephone number of Authorized Agent or Employee of Agen	t: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238019	Filing Due Date for this form:	07/02/2018

Attachments

locol c		Control of the contro	
(060) Coverage and Performance Repo	JIT.		FCC Form 690
	All the said of th		
			Approved by OMB
			OMB Control No. 3060-
			0.0.5 05 0 0000

<010>	Study Area Code	238019
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2017 - 12/2017

<141>

State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Błock Newły Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
NC	0	0000	0	0	0	0.0	0.0	0.0	Yes
	-					1			-
	1								
	 								
	1				1				
							-		
				·-					

	0	Percentage of Total	0
Percentage of		Road Miles covered	
Total Population		by Service	
Reached by			
Service			

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, Inc. ("CWW") has already completed construction in this SAC, and the drive test data and associated coverage files are in its FCC Form 690 Payment Request 3, which was submitted prior to the reporting period for this SAC.

During the reporting period of January 1, 2017 through December 31, 2017, CWW had not constructed in any additional census blocks within the subject Census Tract for this SAC. Therefore, it did not complete any coverage/performance testing for this SAC during the reporting period of January 1, 2017 through December 31, 2017.

Carolina West Wireless, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, Carolina West Wireless, Inc. ("CWW") submits that there are no material updates to the Project Description associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its FCC Auction 901 winning bids.

To date, CWW has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no material updates with respect to network design, construction, deployment, maintenance, and budget associated with this SAC.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

		Approved by OMB
Mobility		OMB 3060-1185
i .	§54.1009 Annual Reporting	Avg. Burden Estimate per Respondent: 18 Hours
Data Col	lection Form	
<010>	Study Area Code	238020
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com
<040>	Has the information required pursuant to \$54.1009	
	<041> Attach a description of the documents file <042> Cite the Study Area Code (SAC) for the For	
<080>	Tribal Lands Reporting (y/n?) (Does this study area covered to the stu	er tribal lands? Yes or No)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Cari	rier Contact Form		Transport Commence of the Comm	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code		238020	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding the	is data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified		7035848678 ext.	
<039>_	Contact Email Address - Email Address of person identifie	ed in data line <030>	tslamowitz@fcclaw.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder			
<110>	FOOD II II II II	0001940022		
<111>		Carolina West Wirele	ess Inc	
<112>				
<113>		<u>Carolina West Wirele</u> 1307 Curtis Bridge F		
<114>	-	Wilkesboro	NO AU	
<115>	-	•		
<116>		NC		
<117>	Tolophono Number	28697		
<118>	Fax Number	3369735000 ext.		
<119>	Email Address	3368387550		
1225		slaytons@carolinawes	st.com	
<120> <121> <122> <123> <124> <125> <126> <127> <128>	Filing Carrier Name Street Address (or PO Box) City State Zip-Code Telephone Number Fax Number Email Address	Carolina West Wirele Carolina West Carolina West Carolina West Carolina West Carolina West Carolina West	oad	
<u>Authorize</u>	d Agent Information if no agent, indicate in this box			
<130>	Name (First, MI, Last, Suffix)	odd Slamowitz		
<131>	Company	ukas, LaFuria, Gutie	errez & Sachs, LLP	
<132>	Street Address (or PO Box)	300 Greensboro Drive	e, Suite 1200	
<133>	City	vsons		······································
<134>	State ve	Α		
<135>	Zip-Code 22	2102		
<136>	Telephone Number 70	035848678 ext.		
<137>		035848696		
<138>	—	slamowitz@fcclaw.com	π	
	_			

(060) Co	verage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8	
<010>_	Study Area Code	238020	
<015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com	
<140>	Coverage and Performance Report Year 01/2017 - 12/2017		
	060_cww_Nc.: Coverage and Performace attachments	zip	

State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance date is uploaded (Yes/no)
			9	See attach	ed worksl	neet			
	Population	ge of Total Reached by	0		Percentage o Road Miles co by Servio	f Total	0		

(070) Urban Rate Comparability Certification Compliance FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
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<010>	Study Area Code	238020
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of	fficer or Employee as to Compliance with 47 CFR §54.1009(a)(4)
certify that I am an officer or employee of the reporting ca form and in any attachments is accurate.	er; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported or
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize	e an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
certify that (Name of Agent) Lukas, LaFuria, Gutierrez &	
carrier. I also certify that I am an officer or employee of the repo	orting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the
authorized agent; and, to the best of my knowledge, the reports a	and data provided to the authorized agent is accurate.
Name of Authorized Agent: Lukas, LaFuria,	Gutierrez & Sachs, LLP
Name of Reporting Carrier: Carolina West Wi	ireless, Inc.
Signature of Authorized Officer or Employee: CERTIFIED ONLINE	VE Date: 06/08/2018
Printed name of Authorized Officer or Employee: Thad Souther	ers
Title or position of Authorized Officer or Employee: CFO	
Telephone number of Authorized Officer or Employee: 336973550	500 ext.1010
Study Area Code of Reporting Carrier: 238020	Filing Due Date for this form: 07/02/2018
	inished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment ider Title 18 of the United States Code, 18 U.S.C. § 1001.

, as agent for the reporting carrier, certify that I am authori	zed to submit the certification on behalf of the reporti	ing carrier; I have provided the data reported herein based o
data provided by the reporting carrier; and, to the best of m	•	•
Name of Reporting Carrier:	Carolina West Wireless, Inc.	
Name of Authorized Agent Firm:	Lukas, LaFuria, Gutierrez & Sachs, LLP	
ignature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 06/06/2018
lame of Authorized Agent Employee:	Todd Slamowitz	
itle or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Telephone number of Authorized Agent or Employee of Agen	t: 7035858678 ext.	
Study Area Code of Reporting Carrier: 238020	Filing Due Date for this form:	07/02/2018

)80) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		238020	
<015>	Study Area Name		Carolina West Wireless,	Inc.
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding t		Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identifi			
<039>	Contact Email Address - Email Address of person identif	ied in data line	<pre><u3u> tslamowitz@fcclaw.com</u3u></pre>	
<142>	State	-		
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation		10	
		Name of Attache	ed Document (.pdf)	
	Market and the second s	de Not Accellen	11 Mars	
	If your company serves Tribal lands, please select (Yes, Neach of these boxes to confirm the status described on t PDF, on line 145, demonstrates coordination with the T government pursuant to § 54.1004 includes:	the attached	bie) for	
			Select	
<146>	Needs assessment and deployment planning with a foc community anchor institutions;	us on Tribal	(Yes, No, Not Applicable)	
:147>	Feasibility and sustainability planning;			
148>	Marketing services in a culturally sensitive manner;			
149>	Compliance with Rights of way processes			
150>	Compliance with Land Use permitting requirements			
151>	Compliance with Facilities Siting rules			
152>	Compliance with Environmental Review processes			
153>	Compliance with Cultural Preservation review processes			
<154>	Compliance with Tribal Business and Licensing requirem	ents.		

(090) Proje	ct Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	220020
<015>	Study Area Name	238020 Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030	> 7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030	
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210> <211>	Actual Completion Date Project Status Description (attached)	Project Status Description - Line 211.pdf
<212> <213> <214> <215> <216> <217>	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The informatio shall be submitted as appropriate. Status of Network Deployment - Network Design Status of Network Deployment - Construction Status of Network Deployment - Deployment Status of Network Deployment - Maintenance Project Budget Status Project Plan Status	{Name of PDF attached}
<218>	Network will Support 3G/4G Mobile Service ?	3G • 4G

avaj Cer	trication - Reporting Carrier	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8
<010>	Study Area Code	238020
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients				
I certify that I am an officer of the reporting carrier; my respons best of my knowledge, the information reported on this form a	sibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the nd in any attachments is accurate.			
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this form can be	punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Page 8 of 8	(102) Certification - Agent / Carrier		ah a a a a a a a a a a a a a a a a a a	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 8 of 8
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<010>	Study Area Code	238020
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

l certify that (Name of Agent) Lukas, LaPuria, Gutierrez & Sachs, LLP also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the agent; and, to the best of my knowledge, the reports and data provided to the authorized agent.	
Name of Authorized Agent: Lukas, LaFuria, Gutierrez & Sachs, LLP	
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/08/2018
Printed name of Authorized Officer: Thad Southers	
Title or position of Authorized Officer: CFO	
Telephone number of Authorized Officer: 3369735500 ext.1010	
Study Area Code of Reporting Carrier: 238020 Filing Due Date fo	or this form: 07/02/2018

Certification of Agent Authorized to Fi	,		
, as agent for the reporting carrier, certify that I am authorized to su eported herein based on data provided by the reporting carrier; and	•		
Name of Reporting Carrier: Carolina West Wireless,	Inc.		
lame of Authorized Agent Firm: Lukas, LaF	uria, Gutierrez & Sachs, LLP		
ignature of Authorized Agent or Employee of Agent: CERTIFIE	ED ONLINE		Date: 06/06/2018
ame of Authorized Agent Employee: Lukas	, LaFuria, Gutierrez & Sachs, LLP		
itle or position of Authorized Agent or Employee of Agent FCC Le	egal Counsel		
elephone number of Authorized Agent or Employee of Agent: 703	35848678 ext.		
tudy Area Code of Reporting Carrier: 238020	Filing Due Date for this form:	07/02/2018	

Attachments

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<010>	Study Area Code	238020
<015>	Study Area Name	
<020>	Program Year	Carolina West Wireless, Inc.
		2018
10302	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <020>	7035848678 ext
<039>	Contact Email Address Email Address of the contact Lines	
<140>	Coverage and Performance Report Year	tslamowitz@fcclaw.com
	To the lage and terrormance Report Year	01/2017 - 12/2017

ł	[ļ	1	J		<c3></c3>	<d><d></d></d>
County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify the Coverage Performs data is up (yes/no
ļ		0	0	0	0.0	0.0	0.0	Yes
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	County		County Census Block Population per Census Block	County Census Block Population Propulation	County Census Block Resident Population Population Population Population Population Population Population Population Reached by Service Service	Resident Population Newly Reached by Service Population Road Miles County Census Block Census Block Population Newly Reached by Service Population Reached Population Re	Resident Population Population Newly Reached by Service Police Population Road Miles Population Per Census Plock Population Population Per Census Plock Population Per Census Plock Newly Service Plock Reached Population Road Miles Per Census Plock Newly Service Plock Reached Population Road Miles Per Census Plock Newly Service Plock Plock Reached	Resident Population Po

Percentage of Total Road Miles covered by Service

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, Inc. ("CWW") has already completed construction in this SAC, and the drive test data and associated coverage files are in its FCC Form 690 Payment Request 3, which was submitted prior to the reporting period for this SAC.

During the reporting period of January 1, 2017 through December 31, 2017, CWW had not constructed in any additional census blocks within the subject Census Tract for this SAC. Therefore, it did not complete any coverage/performance testing for this SAC during the reporting period of January 1, 2017 through December 31, 2017.

Carolina West Wireless, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, ¹ Carolina West Wireless, Inc. ("CWW") submits that there are no material updates to the Project Description associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its FCC Auction 901 winning bids.

To date, CWW has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no material updates with respect to network design, construction, deployment, maintenance, and budget associated with this SAC.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

		FCC Form
Mobility	Fund	Approved by OMB
	§54.1009 Annual Reporting	OMB 3060-1185
	lection Form	Avg. Burden Estimate per Respondent: 18 Hours
	Study Area Code	238021
	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com
<u> </u>		
<040>	Has the information required pursuant to §54.1009	9 been provided with a Form 481 filing (Y/N) <040>
	<041> Attach a description of the documents fil	led with the Form 481 reporting <041>
	<042> Cite the Study Area Code (SAC) for the Fo	orm 481 reporting <042>
<080>	· Tribal Lands Reporting (y/n?) (Does this study area co	over tribal lands? Yes or No)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carri	er Contact Form			FCC Form 690				
				Approved by OMB OMB Control No. 3060-1185 Page 2 of 8				
<010>	Study Area Code		238021					
<015>	Study Area Name		Carolina West Wireless, Inc.					
<020>	Program Year		2018					
<030>	Contact Name - Person USAC should contact regarding this	data	Todd Slamowitz					
<035>	Contact Telephone Number - Number of person identified	in data line <030>	7035848678 ext.					
<039>	Contact Email Address - Email Address of person identified	in data line <030>	tslamowitz@fcclaw.com					
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder							
<110>		01940022						
<111>	-	arolina West Wirel	ess, Inc.					
		arolina West Wirel						
<112>	William & Didded Service Service	307 Curtis Bridge						
<113>		ilkesboro						
<114>	City							
<115>	State							
<116>	Zip-code	8697						
<117>	Telephone Number 3:	369735000 ext.						
<118>	Fax Number 3	368387550						
<119>	Email Address	est.com						
	-							
Contact Ir	nformation							
<u>contact n</u>	if same as above, indicate in this box							
<120>		layton S. Stewart						
<121>		arolina West Wirel	less, Inc.					
<122>		307 Curtis Bridge	Road					
		ilkesboro						
<123>		NC						
<124>	-							
<125>	· ·	8697						
<126>	Telephone Number 3	3369735000 ext.						
<127>	Fax Number 3	368387550						
<128>	Email Address s	laytons@carolinawe	est.com					
	_							
	and A count information							
Authorize	ed Agent Information if no agent, indicate in this box							
<130>		odd Slamowitz						
<131>	Company <u>L</u>	ukas, LaFuria, Gut	tierrez & Sachs, LLP					
<132>		300 Greensboro Dr	ive, Suite 1200					
<133>		'vsons						
<134>	<u>-</u>	22102		·				
<135>	Zip-couc	22102						
<136>	relephone Number	7035848678 ext.						
<137>	- rax number	7035848696						
<138>	Email Address t	slamowitz@fcclaw.	com					

(060) Cov	rerage and Performance Report		FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	238021	
<015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com	
<140>	Coverage and Performance Report Year 01/2017 - 12/2017		
	060 CWW NC	in	

	060_CWW_NC.zip
Coverage and Performace attachments	

<141>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<c1></c1>	<c2></c2>	<c3></c3>	<d>></d>
	State	County			Newly Reached	Population	Road Miles per Census Block	Road Miles per Census Block Newly	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (Yes/no)
								l		
					See attach	ed worksl	neet			
i										
		Percentag	ge of Total	0		Percentage o	f Total)		

Road Miles covered

by Service

Population Reached by

Service

(070) Urban Rate Comparability Certification Compliance	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
	238021
<010> Study Area Code	Carolina West Wireless, Inc.
<015> Study Area Name	
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
- to the form of the state of t	7035848678 ext.
<035> Contact Telephone Number - Number of person identified in data line <030; Contact Telephone Number - Number of person identified in data line <030;	

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

<039> Contact Email Address - Email Address of person identified in data line <030> tslamowitz@fcclaw.com

Certification of O	officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)
I certify that I am an officer or employee of the reporting carri form and in any attachments is accurate.	ier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	The Control of this forms
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can b	pe punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Al certify that (Name of Agent) Lukas, LaFuria, Gutierrez & Sachs, carrier. I also certify that I am an officer or employee of the reporting c authorized agent; and, to the best of my knowledge, the reports and da	LLP is authorized to arrier: my responsibilities include ensu	ring compliance with 47 CFR §54.1009(a)(4) reported to the
Name of Authorized Agent: Lukas, LaFuria, Gutier	rrez & Sachs, LLP	
Name of Reporting Carrier: Carolina West Wireless	s, Inc.	Date: 06/08/2018
ignature of Authorized Officer or Employee: CERTIFIED ONLINE		Dute:
rinted name of Authorized Officer or Employee: Thad Southers		
itle or position of Authorized Officer or Employee: CFO		
elephone number of Authorized Officer or Employee: 3369735500 ext		AR (00 (0010
tudy Area Code of Reporting Carrier: 238021	Filing Due Date for this form:	
Persons willfully making false statements on this form can be punished by	y fine or forfeiture under the Communication 18 of the United States Code, 18 U.S.C. § 100	s Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment 11.

Certification of Agent Authoriz	ed to File Compliance with 47 CFR §54.1009(a))(4) on Benan of Reporting Carrier
I, as agent for the reporting carrier, certify that I am author data provided by the reporting carrier; and, to the best of n	ized to submit the certification on behalf of the report ny knowledge, the information reported herein is accu	ting carrier; I have provided the data reported herein based or urate.
Name of Reporting Carrier:	Carolina West Wireless, Inc.	
Name of Authorized Agent Firm:	Lukas, LaFuria, Gutierrez & Sachs, LLP	Date: 06/06/2018
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 06/06/2018
Name of Authorized Agent Employee:	Todd Slamowitz	
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Telephone number of Authorized Agent or Employee of Age	nt: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238021	Filing Due Date for this form:	07/02/2018

080) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		238021	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding t		Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identifi			
<039>	Contact Email Address - Email Address of person identif	ied in data line <	(030) tslamowitz@fcclaw.com	
<142>	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation			
		Name of Attache	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, each of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the government pursuant to § 54.1004 includes:	the attached	ble) for	
			Select	
			(Yes, No, Not Applicable)	
<146>	Needs assessment and deployment planning with a for community anchor institutions;	cus on Tribal		
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>				
	•			
<152>	•	-		
<153>	·			
<154>	Compliance with Tribal Business and Licensing requirer	nents.		

(090) Project	Update Information	FCC Form 690 Approved by OMB
		OMB Control No. 3060-1185 Page 6 of 8
		Fage vivia
<010>	Study Area Code	238021
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	Project Status Description - Line 211.pdf
\211>	Project Status Description (attached)	
		{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	√
<214>	Status of Network Deployment - Deployment	<u>√</u>
<215>	Status of Network Deployment - Maintenance	
<216>	Project Budget Status	
<217>	Project Plan Status	✓
	and the state of t	25 645
<218>	Network will Support 3G/4G Mobile Service ?) 3G (•) 4G

<218> Network will Support 3G/4G Mobile Service ?

(101) Certification - Reporting Carrier FCC Form 690 Approved by OMB OMB Control No. 3060-1185			
	(101) Certification - Reporting	Carrier	
Page 7 of 8			

<010>	Study Area Code	238021
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment

under Title 18 of the United States Code, 18 U.S.C. § 1001.

05/17/2018 Page 7

FCC Form.690
FCC PULL 000
not Fuel Gentles Anont / Carrier
.02) Certification - Agent / Carrier
Approved by OMB
Approved of one
OMB Control No. 3060-1185
LIMIT LODITOL NO. SUDU-1103
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Date 0 of 0
Page 8 of 8

<010>	Study Area Code	238021
	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

certify that (Name of Agent) Lukas, LaFuria, Gutierrez & Sachs, LI also certify that I am an officer of the reporting carrier; my responsibilities agent; and, to the best of my knowledge, the reports and data provided to t	nclude ensuring the accuracy of the data reporting requirements provided to the data reporting
Name of Authorized Agent: Lukas, LaFuria, Gutierrez & Sachs, LLP	
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/08/2018
Printed name of Authorized Officer: Thad Southers	
Title or position of Authorized Officer: CFO	
Telephone number of Authorized Officer: 3369735500 ext.1010	
Study Area Code of Reporting Carrier: 238021	Filing Due Date for this form: 07/02/2018

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier				
, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.				
Name of Reporting Carrier: Carolina West Wi	reless, Inc.			
Name of Authorized Agent Firm:	kas, LaFuria, Gutierrez & Sachs, LLP			
ignature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 06/06/2018		
lame of Authorized Agent Employee:	Lukas, LaFuria, Gutierrez & Sachs, LLP			
itle or position of Authorized Agent or Employee of Agent	FCC Legal Counsel			
elephone number of Authorized Agent or Employee of Ag	ent: 7035848678 ext.			
tudy Area Code of Reporting Carrier: 238021	Filing Due Date for this form:	07/02/2018		
	on be punished by fine or forfeiture under the Communicatio 18 of the United States Code, 18 U.S.C. § 10	ns Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Titl 101.		

Attachments

(060) Coverage and Performance Report

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	238021
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Beneat Very	01/2017 - 12/2017

<141> Certify that **Total Road** Coverage and Resident **Total Resident** Road Miles Miles Population Performacne Resident per Census Population Road Miles covered per Population per Newly Reached by Service data is uploaded Block Newly Reached by per Census Census Block State County Census Block Census Block Service Block (yes/no) Reached 0000 NC ٥ 0 0.0

Percentage of
Total Population
Reached by
Service

0			

Percentage of Total Road Miles covered by Service

D		

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, Inc. ("CWW") has already completed construction in this SAC, and the drive test data and associated coverage files are in its FCC Form 690 Payment Request 3, which was submitted prior to the reporting period for this SAC.

During the reporting period of January 1, 2017 through December 31, 2017, CWW had not constructed in any additional census blocks within the subject Census Tract for this SAC. Therefore, it did not complete any coverage/performance testing for this SAC during the reporting period of January 1, 2017 through December 31, 2017.

Carolina West Wireless, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, ¹ Carolina West Wireless, Inc. ("CWW") submits that there are no material updates to the Project Description associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its FCC Auction 901 winning bids.

To date, CWW has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no material updates with respect to network design, construction, deployment, maintenance, and budget associated with this SAC.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

1	Fund §54.1009 Annual Reporting lection Form	FCC Form Approved by OMB OMB 3060-1185 Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	238023
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com
<040>	Has the information required pursuant to §54.1009	been provided with a Form 481 filing (Y/N) <040>
	<041> Attach a description of the documents file	ed with the Form 481 reporting <041>
	<042> Cite the Study Area Code (SAC) for the Fo	rm 481 reporting <042>
<080>	Tribal Lands Reporting (y/n?) (Does this study area cover	er tribal lands? Yes or No)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

<i>,</i> •	toward a real support of the support		FCC Form 690
(050) Carri	er Contact Form		Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
-010-	Chudu Aran Cada	238023	
<010> <015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this	data Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified	in data line <030> 7035848678 ext.	
_<039>	Contact Email Address - Email Address of person identified	III data iiie 1000 Estamowi Ezwi Cottaw. com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder		
<110>	FCC Registration Number	01940022	
<111>	Filing Carrier Name	rolina West Wireless, Inc.	
<112>		rolina West Wireless, Inc.	
<113>		07 Curtis Bridge Road	
<114>		ilkesboro	
<115>	State		
<116>	_	8697	
<117>		369735000 ext.	
<118>	——————————————————————————————————————	368387550	
<119>	F II Address		
1113 2	<u>s</u>	laytons@carolinawest.com	
<u>Contact I</u> <120>		layton S. Stewart	
<121>	Filing Carrier Name	arolina West Wireless, Inc.	
<122>	Street Address (or PO Box)	307 Curtis Bridge Road	
<123>	City <u>w</u>	ilkesboro	
<124>	State N	c	
<125>	Zip-Code 2	8697	
<126>	Telephone Number	369735000 ext.	
<127>	Fax Number	368387550	
<128>	Email Address s	laytons@carolinawest.com	
	-		
Authoriz	ted Agent Information if no agent, indicate in this box		
<130>	Martie (11130, 1411, 2030, 301114)	odd Slamowitz	
<131	Company	ukas, LaFuria, Gutierrez & Sachs, LLP	
<132		300 Greensboro Drive, Suite 1200	
<133		'vsons	
<134		VA	
<135	. 5600	22102	
	zip-code	7035848678 ext.	
<136	> Telephone Number	7035848696	
<137	> Fax Number	tslamowitz@fcclaw.com	
<138	> Email Address		

<010>	Study Area Code	238023
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line	<030> 7035848678 ext.
<039>	Contact Feepholic Humber Contact Email Address - Email Address of person identified in data line	
<140>	Coverage and Performance Report Year 01/2017 - 12/2017	
	060_0	CWW_NC.zip
	Coverage and Performace attachments	

<a1></a1>	<a2></a2>		Resident Population per Census Block	Resident Population Newly Reached by Service	Population	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage an Performanc is uploaded (Yes/no)
								-	
	<u> </u>								
	 		;	see attach	ed works	heet			
					<u> </u>	<u> </u>	 	 	
				<u> </u>		 	-		
	 				 	<u> </u>	 		
 	_		 						
						1	<u> </u>		
			0]			0		
	Populati	tage of Total on Reached by Service			Percentage Road Miles by Ser	covered			

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	OMB Control No. 3060-1185
	Page 4 of 8

-010-	Churchy Area Code	238023
_<010>	Study Area Code	Carolina West Wireless, Inc.
<015>	Study Area Name	2018
<020>	Program Year	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<030>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<035>	Contact Telephone Number - Number of person identified in data life 1930	tslamowitz@fcclaw.com
<039>	Contact Email Address - Email Address of person identified in data line <030>	tsiamowitzercciaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of O	Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)
	rier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Total and in any accountance to the second	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can b	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Age certify that (Name of Agent) Lukas, LaFuria, Gutierrez & Sachs,	TTD ie authorized to Si	libmit the intormation reputed on	Deligit of the reporting
	rrier: my responsibilities iliciude ensui	ng compliance with 47 CFR §54.10	09(a)(4) reported to the
authorized agent; and, to the best of my knowledge, the reports and data	a provided to the authorized agent is ac	curate.	
Name of Authorized Agent: Lukas, LaFuria, Gutiern	rez & Sachs, LLP		
Name of Reporting Carrier: Carolina West Wireless,	, Inc.	Date	06/08/2018
Signature of Authorized Officer or Employee: CERTIFIED ONLINE		Date.	0070072010
Printed name of Authorized Officer or Employee: Thad Southers			
Title or position of Authorized Officer or Employee: CFO			
Telephone number of Authorized Officer or Employee: 3369735500 ext.			
Study Area Code of Reporting Carrier: 238023	Filing Due Date for this form:		
Borsons willfully making false statements on this form can be punished by	fine or forfeiture under the Communications 18 of the United States Code, 18 U.S.C. § 1001	Act of 1934, 47 U.S.C. §§ 502, 503(b), or	fine or imprisonment

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	ed to File Compliance with 47 CFR §54.1009(a)(4) on behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authori data provided by the reporting carrier; and, to the best of m	zed to submit the certification on behalf of the reporting knowledge, the information reported herein is accur	ng carrier; I have provided the data reported herein based or ate.
Name of Reporting Carrier:	Carolina West Wireless, Inc.	
Name of Authorized Agent Firm:	Lukas, LaFuria, Gutierrez & Sachs, LLP	Date: 06/06/2018
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 00/00/2010
Name of Authorized Agent Employee:	Todd Slamowitz	
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Telephone number of Authorized Agent or Employee of Ager	nt: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238023	Filing Due Date for this form:	07/02/2018

080) Triba	Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		238023	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this of	lata	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in	data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in	n data line <030>	tslamowitz@fcclaw.com	
<142>	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation	ime of Attached Docun	nent (.pdf)	
	If your company serves Tribal lands, please select (Yes, No, each of these boxes to confirm the status described on the PDF, on line 145, demonstrates coordination with the Triba government pursuant to § 54.1004 includes:	attached	r	

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

(090) Project	Update information	FCC Form 690 Approved by OMB
		OMB Control No. 3060-1185
i.		Page 6 of 8
-010>	Shudu Area Coda	238023
<010>	Study Area Name	Carolina West Wireless, Inc.
<015>	Program Year	2018
<020> <030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
	Contact Enfan Address Eman Ace 195 5 Person	
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
42105	Actual Completion Date	
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	Project Status Description - Line 211.pdf
72.11	,	
		(No. 11 and 1905 attacked)
	n at all and 1005 as line	{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	ı
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	
<214>	Status of Network Deployment - Deployment	√
<215>	Status of Network Deployment - Maintenance	<u>√</u>
<216>	Project Budget Status	
<217>	Project Plan Status	<u> </u>
246	New and will Support 2C/AC Mabile Service 2) 3G () 4G
<218>	Network will Support 3G/4G Mobile Service ?) 30 O 70

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	Page 7 of 8

	no I A o Cada	238023
	Study Area Code	Carolina West Wireless, Inc.
<015>	Study Area Name	2018
<020>	Program Year	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<035>_	Contact relephone Number - Number of person identified in data line (030)	tslamowitz@fcclaw.com
<039>	Contact Email Address - Email Address of person identified in data line <030>	

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Certification of Officer as to the Accur	racy of the Data Reported for Mobility Fund Recipients
	bilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the
pest of my knowledge, the information reported on this formation	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
	
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
	Filing Due Date for this form:
Study Area Code of Reporting Carrier:	
Persons willfully making false statements on this form can be	punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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		FCC Form 690
(102	\ Certification	- Agent / Carrier Approved by OMB

1000		OMB Control No. 3060-1185
		Page 8 of 8
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(3)		

		238023
	itudy Area Code	Carolina West Wireless, Inc.
	tudy Area Name	2018
<020> P	Program Year Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
	Contact Name - Person GSAC should estimate a specific formation and state of the st	7035848678 ext.
<035>C	Contact Telephone Reamail Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

certify that (Name of Agent) <u>Lukas</u> , LaFuria, Gutierrez & Sachs, LLP Iso certify that I am an officer of the reporting carrier; my responsibilities include er gent; and, to the best of my knowledge, the reports and data provided to the author	is authorized to submit the information reported on behalf of the reporting carri- suring the accuracy of the data reporting requirements provided to the authorized zed agent is accurate.
ame of Authorized Agent: Lukas, LaFuria, Gutierrez & Sachs, LLP	
ame of Reporting Carrier: Carolina West Wireless, Inc.	Date: 06/08/2018
ignature of Authorized Officer: CERTIFIED ONLINE	Date: 06/06/2010
rinted name of Authorized Officer: Thad Southers	
itle or position of Authorized Officer: CFO	
elephone number of Authorized Officer: 3369735500 ext.1010	ue Date for this form: 07/02/2018

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to	o File for Mobility Fund Recipients on Beh	alf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authorized to reported herein based on data provided by the reporting carrier;	o submit the reports for Mobility Fund recipients and, to the best of my knowledge, the informati	on behalf of the reporting carrier; I have provided the data on reported herein is accurate.
Name of Reporting Carrier: Carolina West Wireles	s, Inc.	
	LaFuria, Gutierrez & Sachs, LLP	Date: 06/06/2018
Signature of Authorized Agent or Employee of Agent: CERTI	FIED ONLINE	Date. 00/00/2010
Name of Authorized Agent Employee: Last	kas, LaFuria, Gutierrez & Sachs, LLP	
	C Legal Counsel	
Telephone number of Authorized Agent or Employee of Agent:	7035848678 ext.	
Church Area Code of Reporting Carrier: 238023	Filing Due Date for this form:	07/02/2018
Persons willfully making false statements on this form can be p	ounished by fine or forfeiture under the Communication 18 of the United States Code, 18 U.S.C. § 10	ns Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 01.

Attachments

(060) Coverage and Performance Report	and the second second	FCC Form 690 Approved by OMB
<u>arin 19</u>		OMB Control No. 3060-1185

Study Area Code	238023
Study Area Name	Carolina West Wireless, Inc.
Program Year	2018
Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
Coverage and Performance Report Year	01/2017 - 12/2017
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>

<a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d>< Certify that **Total Road** Coverage and Resident Total Resident Road Miles Miles Performacne Resident Population Population per Census **Road Miles** covered per data is uploaded Population per **Newly Reached** Reached by . Block Newly per Census Census Block (yes/no) County State Census Block Census Block by Service Service Block Reached 0000 NC 0 0 0 Yes 0.0 0.0 0.0

> Percentage of Total Population Reached by Service

<141>

0			

Percentage of Total Road Miles covered by Service

0		

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

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Carolina West Wireless, Inc.

Project Status Description

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